PHARMACY AND THERAPEUTICS COMMITTEE
MEDICARE MEETING MINUTES
PPO-POS, HMO-POS, HMO-SNP
August 28, 2025

Attendance: *Microsoft Teams Meeting*
Gary Bledsoe, Staff/Clinical Pharmacist; Dr. Rick Buzard, Associate Chief Medical Officer; Connie Chan, Staff/Clinical Pharmacist; Dr. Edgar Chou, Jefferson Health; Jerry Crawford, Staff/Clinical Pharmacist; Sophie Cweiber, Pharmacy Student Intern; Dr. Neal Demp, Community Behavior Health; Danielle Dolores, Director of Pharmacy; Dr. George E. Downs, Dean Emeritus and Professor, St. Joseph's University; Sharon Ford, Staff/Clinical Pharmacist; Hailey Fry, Centennial Pharmacy; Paul Goebel, Assistant Director Pharmacy, Jefferson Enterprise; Dr. Merleen Harris-Williams, Medical Director; Yelena Hedrick, Staff/Clinical Pharmacist; Gia Ho, Pharmacy Resident; Jessica (Tran) Hoang-Le, Staff/Clinical Pharmacist; Ruth John, Staff/Clinical Pharmacist; Lawrence Jones, Retired Executive Director, Pennsylvania Society of Health-System Pharmacists (PSHP); Kaylei Koerwitz, Manager Pharmacy Operations and Clinical Programs; Dr. Tania Kolev, Medical Director; Hannah McCaffrey, Manager Pharmacy Regulations & Implementation; Brandi Mahler, Supervisor Pharmacy Technicians; Lisa Murray, Staff/Clinical Pharmacist; Maryana Prokopets, Staff/Clinical Pharmacist; Kateryna Puia, Clinical Programs Pharmacist; Pablo Ramirez, Pharmacy Student Intern; Frances Fernandez Rivera, Pharmacy Student Intern; Julie Samuel, Clinical Programs Pharmacist; Heather Scheckner, Clinical Pharmacist, Jefferson Health; Mike Smikovecus, Staff/Clinical Pharmacist; Robert Spencer, Staff/Clinical Pharmacist; Shelley Staffa, Clinical Pharmacist; Justin Steffan, Staff/Clinical Pharmacist; Brian Swift, Enterprise Vice President/Chief Pharmacy Officer, Jefferson Health; Fallan Vaisberg, Formulary Pharmacist; Jeanine Zubrzycki, Staff/Clinical Pharmacist

Excused: *Dr. Paul Aitken, Medical Director; Dr. Demian Elder, Medical Director; Leah Finken, Clinical Programs Pharmacist; Samantha Jackson, Clinical Pharmacist; Sanjiv Raj, Associate VP Customer Engagement; Sara Sadiq, Staff/Clinical Pharmacist; Dr. Chris Squillaro, Medical Director, Magellan Behavioral Health*

Minutes taken by: Joana Iverson

I. Administrative Update

TOPIC	DISCUSSION	ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
Minutes Review/Approval	*D. Dolores presented the minutes from the May 2025 meeting to the Committee for review.*	*The Committee approved the minutes from our last meeting as presented.*	*D. Dolores*	*Resolved*	

TOPIC	DISCUSSION	ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
2026 Formulary Structure	*H. McCaffrey reviewed the 2026 Medicare formulary and benefit structure*		*H. McCaffrey*	*Informational*	

II. Drug Formulary Review/Update

TOPIC	DISCUSSION	ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
2026 Prior Authorization Criteria Additions – CMS Review	*The Committee reviewed the 2026 Prior Authorization Criteria additions. The Committee approved as presented:*	*The Committee approved the 2026 Prior Authorization Criteria additions. It will be sent to CMS for approval. (See attached for voting detail)*	*F. Vaisberg H. McCaffrey*	*Resolved*	
2026 Prior Authorization Criteria Updates	*The Committee reviewed the 2026 Prior Authorization Criteria Updates. The Committee approved as presented:*	*The Committee reviewed the 2026 Prior Authorization Criteria Updates. It will be sent to CMS for approval. (See attached for voting detail)*	*F. Vaisberg H. McCaffrey M. Smikovecus*	*Resolved*	

Criteria Name	***6T Premium (HMO-SNP)***	***5T Core (PPO, HMO)***	***5T Value (PPO, HMO)***
Cresemba	*X*	*X*	*X*
Denosumab – Oncology (formerly Xgeva)	*X*	*X*	*X*
Eucrisa	*X*	*X*	*X*
Revcovi	*X*	*X*	*X*
Rezdiffra	*X*	*X*	*X*
Tolvaptan	*X*	*X*	*X*
Winrevair	*X*	*X*	*X*

Criteria Name	***6T Premium (HMO-SNP)***	***5T Core (PPO, HMO)***	***5T Value (PPO, HMO)***
Botulinum Toxins	*X*	*X*	*X*
Brand Major Depressive Disorder Agents (NSO)	*X*	*X*	*X*
Exception Criteria	*X*	*X*	*X*
GLP-1 Agonists	*X*	*X*	*X*
Haegarda	*X*	*X*	*X*
High Risk Medication - Antidepressants	*X*	*X*	*X*
High Risk Medication - Antiemetics	*X*	*X*	*X*

TOPIC	DISCUSSION				ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	High Risk Medication - Antihistamines	*X*	*X*	*X*				
	High Risk Medication - Antiparkinson	*X*	*X*	*X*				
	High Risk Medication - Antispasmodics	*X*	*X*	*X*				
	High Risk Medication - Butalbital combinations	*NF*	*X*	*NF*				
	High Risk Medication - Diazepam	*X*	*X*	*X*				
	High Risk Medication - Lorazepam	*X*	*X*	*X*				
	High Risk Medication - Meclizine	*X*	*X*	*X*				
	High Risk Medication - Non-BZD Sedative Hypnotics	*X*	*X*	*X*				
	High Risk Medication - Skeletal Muscle Relaxants	*X*	*X*	*X*				
	High Risk Medication - Temazepam	*X*	*X*	*X*				
	Injectable Testosterone Products	*X*	*X*	*X*				
	Intravenous Immune Globulin (IVIG)	*X*	*X*	*X*				
	L-glutamine	*X*	*X*	*X*				
	Mifepristone	*X*	*X*	*X*				

<table>
<tr><th>TOPIC</th><th>DISCUSSION</th><th>ACTIONS</th><th>RESPONSIBLE PARTY</th><th>RESOLVED/ PENDING</th><th>DUE DATE</th></tr>
<tr><td></td><td>
<table>
<tr><td>Sodium Oxybate</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>Sympazan (NSO)</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>Tavneos</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>Tocilizumab (Tyenne)</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>Uptravi</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>Xermelo</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>Xifaxan 200 mg</td><td>NF</td><td>X</td><td>NF</td></tr>
<tr><td>Xifaxan 550 mg</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>Zurzuvae (NSO)</td><td>X</td><td>X</td><td>X</td></tr>
</table>
</td><td></td><td></td><td></td><td></td></tr>
<tr><td>2026 Prior Authorization Removals</td><td>
The Committee reviewed the 2026 Prior Authorization Removals. The Committee approved as presented:
<table>
<tr><th>Drug Name</th><th>6T Premium (HMO-SNP)</th><th>5T Core (PPO, HMO)</th><th>5T Value (PPO, HMO)</th></tr>
<tr><td>High-Risk Medication – Antidepressants: Nortriptyline hcl capsule and solution</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>High-Risk Medication – Antispasmodics: Scopolamine 1 mg/3days patch 72hr</td><td>X</td><td>X</td><td>X</td></tr>
</table>
</td><td>The Committee reviewed the 2026 Prior Authorization Removals. It will be sent to CMS for approval. (See attached for voting detail)</td><td>F. Vaisberg</td><td>Resolved</td><td></td></tr>
<tr><td>2026 Step Therapy Criteria</td><td>
The Committee reviewed the 2026 Step Therapy Criteria. The Committee approved as presented:
<table>
<tr><th>Drug Name</th><th>6T Premium (HMO-SNP)</th><th>5T Core (PPO, HMO)</th><th>5T Value (PPO, HMO)</th></tr>
<tr><td>Brand Antipsychotic ST – Cobenfy added</td><td>X</td><td>X</td><td>X</td></tr>
<tr><td>Jardiance ST</td><td>X</td><td>X</td><td>X</td></tr>
</table>
</td><td>The Committee reviewed the 2026 Step Therapy Criteria. It will be sent to CMS for approval. (See attached for voting detail)</td><td>F. Vaisberg</td><td>Resolved</td><td></td></tr>
<tr><td>2026 Formulary Additions - Outlier Stages 1, 2 and 3</td><td>
The Committee reviewed the 2026 Formulary Additions - Outlier Stages 1, 2 and 3. The Committee approved as presented:
<table>
<tr><th>Drug Name</th><th>6T Premium (HMO-SNP)</th><th>5T Core (PPO, HMO)</th><th>5T Value (PPO, HMO)</th></tr>
<tr><td>Fosfomycin 3000 mg granules for oral solution</td><td>T4</td><td>T4</td><td>T4</td></tr>
</table>
</td><td>The Committee reviewed the 2026 Formulary Additions - Outlier Stages 1, 2 and 3. It will be sent to CMS for approval.</td><td>H. McCaffrey</td><td>Resolved</td><td></td></tr>
</table>

TOPIC	DISCUSSION				ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	Kloxxado 80 mg/mL nasal spray	*T3*	*T3*	*T3*	*(See attached for voting detail)*			
	Spiriva Respimat 1.25 mcg/actuation	*T4, QL*	*T4, QL*	*T4, QL*				
	Revcovi 1.6 mg/mL injection	*T5, PA*	*T5, PA*	*T5, PA*				
	Rezdiffra 60, 80, 100 mg tablet	*T5, QL, PA*	*T5, QL, PA*	*T5, QL, PA*				
	Voquezna 14 day dualpak	*T4, QL*	*T4, QL*	*T4, QL*				
	Voquezna 14 day triplepak	*T4, QL*	*T4, QL*	*T4, QL*				
	Winrevair 45 mg, 2 vial kit	*T5, PA*	*T5, PA*	*T5, PA*				
	Winrevair 45, 60 mg injection	*T5, PA*	*T5, PA*	*T5, PA*				
	Winrevair 60 mg, 2 vial kit	*T5, PA*	*T5, PA*	*T5, PA*				
	Yonsa 125 mg tablet	*T5, QL, PA*	*T5, QL, PA*	*T5, QL, PA*				
2026 Formulary Additions	*The Committee reviewed the 2026 Formulary Additions. The Committee approved as presented:*				*The Committee reviewed the 2026 Formulary Additions. It will be sent to CMS for approval. (See attached for voting detail)*	*H. McCaffrey*	*Resolved*	
	Drug Name	***6T Premium (HMO-SNP)***	***5T Core (PPO, HMO)***	***5T Value (PPO, HMO)***				
	Avmapki Fakzynja Co-Pack 0.8 & 200 mg	*T5, QL, PA*	*T5, QL, PA*	*T5, QL, PA*				
	Clindamycin Phosphate 300 mg/2mL solution	*T4*	*T4*	*T4*				
	Clindamycin Phosphate 600 mg/4mL solution	*T4*	*T4*	*T4*				
	Doxycycline Hyclate 100 mg solution	*T4*	*T4*	*T4*				
	Emtricitab-rilpivir-tenofov	*T5, QL*	*T5, QL*	*T5, QL*				

TOPIC	DISCUSSION				ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	DF 200-25-300 mg tablet							
	Eslicarbazepine acetate 200, 400, 600, 800 mg tablet	*T3, QL*	*T3, QL*	*T3, QL*				
	Kaletra 400-100 mg/5mL solution	*T4, QL*	*T4, QL*	*T4, QL*				
	Lojaimiess 91 day	*NF*	*T2*	*NF*				
	Meleya 28 day	*T3*	*T2*	*T3*				
	Nilotinib hcl 50, 150, 200 mg capsule	*T5, QL, PA*	*T5, QL, PA*	*T5, QL, PA*				
	Sacubitril-valsartan 24-26 mg tab	*T3, QL*	*T3, QL*	*T3, QL*				
	Sacubitril-valsartan 49-51 mg tab	*T3, QL*	*T3, QL*	*T3, QL*				
	Sacubitril-valsartan 97-103 mg tab	*T3, QL*	*T3, QL*	*T3, QL*				
	Sunlenca 300 mg tablet	*T5, QL*	*T5, QL*	*T5, QL*				
	Ticagrelor 60, 90 mg oral tablet	*T3*	*T3*	*T3*				
	Tolvaptan 15 mg therapy pack	*T5, PA*	*T5, PA*	*T5, PA*				
	Tolvaptan 30 & 15 mg therapy pack	*T5, PA*	*T5, PA*	*T5, PA*				
	Tolvaptan 45 & 15 mg therapy pack	*T5, PA*	*T5, PA*	*T5, PA*				
	Tolvaptan 60 & 30 mg therapy pack	*T5, PA*	*T5, PA*	*T5, PA*				
	Tolvaptan 90 & 30 mg therapy pack	*T5, PA*	*T5, PA*	*T5, PA*				

TOPIC	DISCUSSION				ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	Tremfya Induction Pack For Crohn's Disease	*T5, PA*	*T5, PA*	*T5, PA*				
	Ustekinumab 130 mg/26mL solution	*T5, PA*	*T5, PA*	*T5, PA*				
	Ustekinumab 45 mg/0.5mL PFS	*T5, PA*	*T5, PA*	*T5, PA*				
	Ustekinumab 45 mg/0.5mL solution	*T5, PA*	*T5, PA*	*T5, PA*				
	Ustekinumab 90 mg/mL PFS	*T5, PA*	*T5, PA*	*T5, PA*				
	Valtya 1/50 28 day	*T2*	*T2*	*T2*				
	Wyost 120 mg/1.7mL solution	*T5, PA*	*T5, PA*	*T5, PA*				
	Xelria FE 28 day	*NF*	*T2*	*NF*				
2026 Formulary Removals	*The Committee reviewed the 2026 Formulary Removals (all formularies). The Committee approved as presented:* • *Aptiom 200, 400, 600, 800 mg tablet** • *Brilinta 60 mg tablet** • *Calquence 100 mg capsule* • *Complera tablet** • *Enpresse 28 day* • *Entresto 24-26 mg tab** • *Entresto 49-51 mg tab** • *Entresto 97-103 mg tab** • *Ery-tab 250, 333, 500 mg tablet* • *Euthyrox tablet – all strengths* • *Jynarque 15 mg therapy pack** • *Jynarque 45 & 15 mg therapy pack** • *Jynarque 60 & 30 mg therapy pack** • *Jynarque 90 & 30 mg therapy pack** • *Lopinavir-ritonavir 400-100 mg/5mL solution* • *Menactra solution* • *Namzaric 7 & 14 & 21 & 28 mg capsule pack* • *Retevmo 40, 80 mg capsule* • *Tasigna 50, 150, 200 mg capsule** • *Trecator 250 mg tablet* • *Trivora 28 day*				*The Committee reviewed the 2026 Formulary Removals (all formularies). It will be sent to CMS for approval. (See attached for voting detail)*	*H. McCaffrey*	*Resolved*	

TOPIC	DISCUSSION	ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	• *Xgeva 120 mg/1.7mL solution** **Brand removed, generic/biosimilar added*				
2026 Tier Updates	*The Committee reviewed the 2026 Tier Updates. The Committee approved as presented.* • *Albendazole 200 mg tablet - T5 to T3* • *Cinacalcet hcl 90 mg tablet - T5 to T3* • *Darunavir 600 mg tablet - T5 to T3* • *Dimethyl fumarate 120 mg DR capsule - T5 to T3* • *Dimethyl fumarate Starter Pack 120 & 240 mg - T5 to T3* • *Droxidopa 100 mg capsule - T5 to T3* • *Efavirenz-emtricitab-tenofo DF 600-200-300 mg tablet - T5 to T3* • *Eliquis 2.5, 5 mg tablet - T4 to T3* • *Eliquis DVT/PE Starter Pack - T4 to T3* • *Emtricitabine-tenofovir DF 100-150 mg tablet - T5 to T3* • *Emtricitabine-tenofovir DF 167-250 mg tablet - T5 to T3* • *Entresto 24-26, 49-51, 97-103 mg tablet - T4 to T3* • *Entresto 6-6, 15-16 mg sprinkle capsule - T4 to T3* • *Everolimus 0.25 mg tablet - T5 to T3* • *Imatinib mesylate 100 mg tablet - T5 to T3* • *Jardiance 10, 25 mg tablet - T4 to T3* • *Mirabegron 25, 50 mg ER tablet - T3 to T2* • *Sirolimus 1 mg/mL solution - T5 to T3* • *Tadalafil (PAH) 20 mg tablet - T5 to T3* • *Tigecycline 50 mg solution - T5 to T3* • *Tetrabenazine 12.5 mg tablet - T5 to T3*	*The Committee reviewed the 2026 Tier Updates. It will be sent to CMS for approval. (See attached for voting detail)*	*H. McCaffrey*	*Resolved*	
2026 Quantity Limit Additions	*The Committee reviewed the 2026 Quantity Limit Additions. The Committee approved as presented.* • *Avmapki Fakzynja Co-Pack 0.8 & 200 mg - 66/28 days* • *Emtricitab-rilpivir-tenofov DF 200-25-300 mg tablet - 30/30 days* • *Eslicarbazepine acetate 200, 400 mg tablet - 30/30 days* • *Eslicarbazepine acetate 600, 800 mg tablet - 60/30 days* • *Eucrisa 2% ointment - 100 g/30 days* • *Kaletra 400-100 mg/5mL solution - 480 mL/30 days* • *Nilotinib hcl 50, 150, 200 mg capsule - 120/30 days* • *Phenobarbital 15, 16.2. 30, 32.4, 60, 64.8, 97.2, 100 mg tablet - 120/30 days* • *Phenobarbital 20 mg/5mL elixir - 1500 mL/30 days* • *Rezdiffra 60, 80, 100 mg tablet - 30/30 days* • *Sacubitril-valsartan 24-26 mg tab - 60/30 days* • *Sacubitril-valsartan 49-51 mg tab - 60/30 days*	*The Committee reviewed the 2026 Quantity Limit Additions. It will be sent to CMS for approval. (See attached for voting detail)*	*H. McCaffrey*	*Resolved*	

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- *Sacubitril-valsartan 97-103 mg tab - 60/30 days*
- *Spiriva Respimat 1.25 mcg/actuation - 4/28 days*
- *Voquezna Dual Pak 500-20 mg - 224/365 days*
- *Voquezna Triple Pak 500-500-20 mg - 224/365 days*
- *Xeljanz 1 mg/mL solution - 480 mL/24 days*
- *Xeljanz 5, 10 mg tablet - 60/30 days*
- *Xeljanz XR 11, 22 mg tablet - 30/30 days*
- *Yonsa 125 mg tablet - 120/30 days*

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<tr><td>2026 Quantity Limit Updates</td><td>The Committee reviewed the 2026 Quantity Limit Updates. The Committee approved as presented.

- *Buprenorphine hcl 2 mg SL tablet - 180/30 days*
- *Buprenorphine hcl 8 mg SL tablet - 120/30 days*
- *Buprenorphine hcl-naloxone hcl 12-3 mg film - 90/30 days*
- *Buprenorphine hcl-naloxone hcl 2-0.5 mg film - 180/30 days*
- *Buprenorphine hcl-naloxone hcl 2-0.5 mg SL tablet - 180/30 days*
- *Buprenorphine hcl-naloxone hcl 4-1 mg film - 90/30 days*
- *Buprenorphine hcl-naloxone hcl 8-2 mg film - 120/30 days*
- *Buprenorphine hcl-naloxone hcl 8-2 mg SL tablet - 120/30 days*
- *Cyclobenzaprine hcl 5 mg tablet - 90/30 days*
- *Fluticasone propionate diskus 100 mcg/act actuation - 120/30 days*
- *Hydrocortisone valerate 0.2% cream - QL removed*
- *Revuforj 25 mg tablet - 240/30 days*

</td><td>The Committee reviewed the 2026 Quantity Limit Updates. It will be sent to CMS for approval. (See attached for voting detail)</td><td>H. McCaffrey</td><td>Resolved</td><td></td></tr>
<tr><td>2025 Prior Authorization Criteria Updates</td><td>The Committee reviewed the 2025 Prior Authorization Criteria Updates. The Committee approved as presented:

- *Adalimumab-aacf*
- *Adalimumab-bwwd (Hadlima)*
- *Benlysta*
- *Doptelet*
- *Dupixent*
- *Exception criteria (see 2026)*
- *Humira*
- *Kerendia*
- *Mavyret*
- *Rinvoq*

</td><td>The Committee reviewed the 2025 Prior Authorization Criteria Updates. It will be sent to CMS for approval. (See attached for voting detail)</td><td>F. Vaisberg
Y. Hedrick
C. Chan</td><td>Resolved</td><td></td></tr>
<tr><td>2025 Formulary Additions</td><td>The Committee reviewed the 2025 Formulary Additions. The Committee approved as presented:
<table>
<tr><th>Drug Name</th><th>1T Premium (HMO-SNP)</th><th>5T Core (PPO, HMO)</th><th>5T Value (PPO, HMO)</th></tr>
<tr><td>Bromfenac sodium 0.07%</td><td>T1</td><td>T4</td><td>T4</td></tr>
</table>
</td><td>The Committee reviewed the 2025 Formulary Additions. It will be sent to CMS for approval.</td><td>F. Vaisberg</td><td>Resolved</td><td></td></tr>
</table>

TOPIC	DISCUSSION				ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	ophthalmic solution				*(See attached for voting detail)*			
	Fanapt Titration Pack B 1 & 2 & 6 & 8 mg tablet	*T1, QL, ST*	*T4, QL, ST*	*T4, QL, ST*				
	Fanapt Titration Pack C 1 & 2 & 6 mg tablet	*T1, QL, ST*	*T4, QL, ST*	*T4, QL, ST*				
	Fidaxomicin 200 mg tablet	*T1, QL, NDS*	*T5, QL*	*T5, QL*				
	Ibtrozi 200 mg capsule	*T1, QL, PA, NDS*	*T5, QL, PA*	*T5, QL, PA*				
	Kaletra 400-100 mg/5mL solution	*T1, QL*	*T4, QL*	*T4, QL*				
	Kerendia 40 mg tablet	*T1, QL, PA*	*T4, QL, PA*	*T4, QL, PA*				
	Orquidea 0.35 mg tablet	*T1*	*T2*	*T3*				
	Penmenvy suspension	*T1*	*T3*	*T3*				
	Perampanel 2 mg tablet	*T1, QL, PA*	*T4, QL, PA*	*T4, QL, PA*				
	Perampanel 4, 6, 8, 10, 12 mg tablet	*T1, QL, PA, NDS*	*T5, QL, PA*	*T5, QL, PA*				
	Rivaroxaban 1 mg/mL suspension	*T1, QL*	*T3, QL*	*T3, QL*				
	Sacubitril-valsartan 24-26, 49-51, 97-103 mg tablet	*T1, QL*	*T3, QL*	*T3, QL*				
	Ticagrelor 90 mg tablet	*T1*	*T3*	*T3*				
2025 Formulary Removals	*The Committee reviewed the 2025 Formulary Removals. The Committee approved as presented:* • *PrenatVite Complete 1 mg tablet* • *PrenatVite Plus 1 mg tablet* • *Entresto 24-26, 49-51, 97-103 mg tablet*				*The Committee reviewed the 2025 Formulary Removals. It will be sent to CMS for approval. (See attached for voting detail)*	*F. Vaisberg*	*Resolved*	

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<tr><td>2025 May, June, July FRF Formulary Additions Protected Class</td><td>
The Committee reviewed the May, June, July FRF Formulary Additions Protected Class. The Committee approved as presented:
<table>
<tr><th>Drug Name</th><th>1T Premium (HMO-SNP)</th><th>5T Core (PPO, HMO)</th><th>5T Value (PPO, HMO)</th></tr>
<tr><td>Avmapki Fakzynja Co-Pack 0.8 & 200 mg</td><td>T1, QL, PA, NDS</td><td>T5, QL, PA</td><td>T5, QL, PA</td></tr>
<tr><td>Emtricitab-rilpivir-tenofov DF 200-25-300 mg tablet</td><td>T1, QL. NDS</td><td>T5, QL</td><td>T5, QL</td></tr>
<tr><td>Eslicarbazepine acetate 200, 400, 600, 800 mg tablet</td><td>T1, QL</td><td>T4, QL</td><td>T4, QL</td></tr>
<tr><td>Nilotinib hcl 50, 150, 200 mg capsule</td><td>T1, QL, PA, NDS</td><td>T5, QL, PA</td><td>T5, QL, PA</td></tr>
<tr><td>Sunlenca 300 mg tablet</td><td>T1, QL, NDS</td><td>T5, QL</td><td>T5, QL</td></tr>
</table>
</td><td>The Committee reviewed the May, June, July FRF Formulary Additions Protected Class. It will be sent to CMS for approval. (See attached for voting detail)</td><td>F. Vaisberg</td><td>Resolved</td><td></td></tr>
<tr><td>2025 May, June, July FRF Formulary Additions Non-Protected Class</td><td>
The Committee reviewed the May, June, July FRF Formulary Additions Non-Protected Class. The Committee approved as presented:
<table>
<tr><th>Drug Name</th><th>1T Premium (HMO-SNP)</th><th>5T Core (PPO, HMO)</th><th>5T Value (PPO, HMO)</th></tr>
<tr><td>Amnesteem 30 mg capsule</td><td>T1</td><td>T4</td><td>T4</td></tr>
<tr><td>Doxycycline hyclate 100 mg solution</td><td>T1</td><td>T4</td><td>T4</td></tr>
<tr><td>Lojaimiess 91 day</td><td>T1</td><td>T2</td><td>NF</td></tr>
<tr><td>Meleya 28 day</td><td>T1</td><td>T2</td><td>T3</td></tr>
<tr><td>Paxlovid 6 x 150 mg & 5 x 100 mg tablet pack</td><td>T1, QL</td><td>T3, QL</td><td>T3, QL</td></tr>
<tr><td>Valtya 1/50 28 day</td><td>T1</td><td>T2</td><td>T2</td></tr>
<tr><td>Xelria FE 28 day</td><td>T1</td><td>T2</td><td>T2</td></tr>
</table>
</td><td>The Committee reviewed the May, June, July FRF Formulary Additions Non-Protected Class. It will be sent to CMS for approval. (See attached for voting detail)</td><td>F. Vaisberg</td><td>Resolved</td><td></td></tr>
<tr><td></td><td></td><td></td><td></td><td></td><td></td></tr>
</table>

<table>
<tr><th>TOPIC</th><th>DISCUSSION</th><th>ACTIONS</th><th>RESPONSIBLE PARTY</th><th>RESOLVED/ PENDING</th><th>DUE DATE</th></tr>
<tr><td>2025 May, June, July FRF Formulary Removals*</td><td>The Committee reviewed the May, June, July FRF Formulary Removals. The Committee approved as presented:
*These drugs will remain on the formulary until the end of the benefit year
**Formulary removal; no longer eligible for coverage under Part D
<table><tr><th>Drug Name</th><th>1T Premium (HMO-SNP)</th><th>5T Core (PPO, HMO)</th><th>5T Value (PPO, HMO)</th></tr><tr><td>Auranofin 3 mg capsule</td><td>X</td><td>X</td><td>NF</td></tr><tr><td>Austedo XR Patient Titration 6 & 12 & 24 mg pack</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Desogestrel-Ethinyl Estradiol 0.15-0.02/0.01 mg tablet</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Ery-Tab 250, 333, 500 mg DR tablet</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Euthyrox tablet – all strengths**</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Fuzeon 90 mg solution</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Libervant 5, 7.5, 10, 12.5, 15 mg film</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Lopinavir-Ritonavir 400-100 mg/5mL solution</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Menactra solution</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Namzaric 7 & 14 & 21 & 28 mg capsule pack</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Retevmo 40, 80 mg capsule</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Spritam 750, 1000 mg tablet</td><td>X</td><td>X</td><td>X</td></tr><tr><td>Trivora 28-day tablet</td><td>X</td><td>X</td><td>X</td></tr></table></td><td>The Committee reviewed the May, June, July FRF Formulary Removals. It will be sent to CMS for approval. (See attached for voting detail)</td><td>F. Vaisberg</td><td>Resolved</td><td></td></tr>
<tr><td>2025 Quantity Limit Additions</td><td>The Committee reviewed the Quantity Limit Additions (all formularies). The Committee approved as presented:
Avmapki Fakzynja Co-Pack 0.8 & 200 mg - 66/28 days
Edurant PED 2.5 mg soluble tablet - 180/30 days
Emtricitab-rilpivir-tenofov DF 200-25-300 mg tablet - 30/30 days
Eslicarbazepine acetate 200, 400 mg tablet - 30/30 days
Eslicarbazepine acetate 600, 800 mg tablet - 60/30 days
Fanapt Titration Pack B 1 & 2 & 6 & 8 mg tablet - 24/365 days
Fanapt Titration Pack C 1 & 2 & 6 mg tablet - 16/365 days
Fidaxomicin 200 mg tablet - 60/30 days
Ibtrozi 200 mg capsule - 90/30 days
Kaletra 400-100 mg/5mL solution - 480 mL/30 days
Kerendia 40 mg tablet - 30/30 days</td><td>The Committee reviewed the Quantity Limit Additions (all formularies). It will be sent to CMS for approval. (See attached for voting detail)</td><td>F. Vaisberg</td><td>Resolved</td><td></td></tr>
</table>

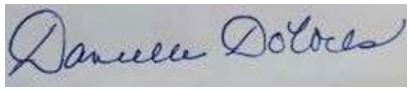
TOPIC	DISCUSSION	ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	• *Nilotinib hcl 50, 150, 200 mg capsule - 120/30 days* • *Perampanel 2, 4, 6, 8, 10, 12 mg tablet - 30/30 days* • *Rivaroxaban 1 mg/mL suspension - 620 mL/30 days* • *Sacubitril-valsartan 24-26, 49-51, 97-103 mg tablet - 60/30 days*				
2025 Quantity Limit Updates	*The Committee reviewed the Quantity Limit Updates (all formularies). The Committee approved as presented:* • *Gomekli 1 mg capsule - 126/28 days* • *Gomekli 1 mg soluble tablet - 168/28 days* • *Retevmo 40 mg tablet - 120/30 days* • *Retevmo 80 mg tablet - 180/30 days* • *Revuforj 25 mg tablet - 240/30 days*	*The Committee reviewed the Quantity Limit Updates (all formularies). It will be sent to CMS for approval. (See attached for voting detail)*	*F. Vaisberg*	*Resolved*	
III. New Drug Review	*The following new Protected Class Drugs were reviewed and will be added to the formulary per CMS regulations:* • *Lynozyfic (linvoseltamab-gcpt) Injection** • *Zegfrovy (sunvozertinib) Tablets** • *Spritam (levetiracetam) Tablets for Oral Suspension* • *Breyanzi (lisocabtagene maraleucel) Suspension for Intravenous Infusion* • *Datroway (datopotamab deruxtecan-dlnk) Lyophilized Powder for Injection* • *Monjuvi (tafasitamab-cxix) for Injection* • *Yeztugo (lenacapavir) Tablets and Injection** • *Keytruda (pembrolizumab) for Injection* • *Zusduri (mitomycin) for Intravesical Solution - formerly UGN-102** • *Ibtrozi (taletrectinib) Capsules** • *Brukinsa (zanubrutinib) Capsules and Tablets* • *Nubeqa (daraloutamid) Tablets* • *Zynyz (retifanlimab-dlwr) Injection* • *Welireg (belzutifan) Tablets* • *Emrelis (telisotuzumab vedotin-tllv) Lyophilized Powder for Injection** • *Avmapki Fakzynja Co-Pack (avutometinib and defactinib, co-packaged) Capsules/Tablets** • *Mezofy (aripiprazole) Oral Film** *The following medications are Formulary with new FDA-approved indications:* • *Shingrix (zoster vaccine, recombinant, adjuvanted) Injection* • *Kerendia (finerenone) Tablets* • *Spikevax (Moderna COVID-19 Vaccine, mRNA) Injection* • *Gammagard Liquid (immune globulin infusion [human]) Solution*	*Per CMS regulations, "The P&T committee will make a reasonable effort to review a new FDA approved drug product (or new FDA approved indication) within 90 days of its release onto the market and will make a decision on each new FDA approved drug product (or new FDA approved indication) within 180 days of its release onto the market, or a clinical justification will be provided if this timeframe is not met. Formularies must include substantially all drugs in the six protected categories that are FDA approved by the last CMS specified*	*G. Ho*	*Resolved*	

TOPIC	DISCUSSION	ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	• *Benlysta (belimumab) Injection* • *Dupixent (dupilumab) Injection* • *mRESVIA (respiratory syncytial virus vaccine, mRNA) Injection* • *Mavyret (glecaprevir and pibrentasvir) Tablets and Oral Pellets* • *MNEXSPIKE (Covid-19 Vaccine, mRNA) Injection** • *Hadlima (adalimumab-bwwd) Injection* • *Nuvaxovid (Covid-19 Vaccine, Adjuvanted) Injectable Suspension** • *Rinvoq (upadacitinib) Extended-Release Tablets* *The following medications were reviewed and will be kept as Non-formulary. Prior Authorization criteria will be developed as needed:* • *Anzupgo (delgocitinib) Topical Cream** • *Kirsty (insulin aspart-xjhz) Injection** • *Ekterly (sebetralstat) Tablets** • *Kisunla (donenemab-azbt) Injection* • *Gamifant (emapalumab-lzsg) Injection* • *Vizamyl (flutemetamol F 18) Injection* • *Neuraceq (florbetaben F18) Injection* • *Harliku (nitisinone) Tablets** • *Endari (L-glutamine) Oral Powder* • *Andembry (garadacimab-gxii) Injection** • *Arynta (lisdexamfetamine dimesylate) Oral Solution** • *Steqeyma (ustekinumab-stba) Injection* • *Enflonsia (clesrovimab-cfor) Injection** • *Widaplik (amlodipine, indapamide and telmisartan) Tablets** • *Xifyrm (meloxicam) Injection** • *Xenoview (Xenon Xe 129 hyperpolarize) Oral Inhalation* • *Tryptyr (aolctremon) Ophthalmic Solution** • *Khindivi (hydrocortisone) Oral Solution** • *Yutrepia (treprostinil) Inhalation Powder** • *Zoryve (roflumilast) Cream and Foam* • *Starjemza (usetekinumab-hmny) Injection** • *Nucala (mepolizumab) Injection* • *Susvimo (ranibizumab) Injection for Intravitreal Use via Ocular Implant* • *Yuflyma (adalimumab-aaty) Injection* • *Jivi (antihemophilic factor [recombinant] PEGylated-aucl) Injection* • *Brekiya (dihydroergotamine mesylate) Injection** • *Otulfi (ustekinumab-aauz) Injection* • *Selarsdi (ustekinumab-aekn) Injection*	*HPMS formulary upload date for the upcoming contract year. New drugs or newly approved uses for drugs within the six classes that come onto the market after the CMS specified formulary upload date will be subject to an expedited P&T committee review. The expedited review process requires P&T committees to make a decision within 90 days, rather than the normal 180-day requirement. At the end of the 90 day period, these drugs must be added to Part D plan formularies." (See attached for voting detail.)*			

TOPIC	DISCUSSION	ACTIONS	RESPONSIBLE PARTY	RESOLVED/ PENDING	DUE DATE
	• *Atzumi (dihydroergotamine mesylate) Nasal Powder** • *Imaavy (nipocalimab-aahu) Injection** • *Zevaskyn (prademagene zamikeracel) Gene-Modified Cellular Sheets** • *HemiClor (chlorthalidone) Tablets** *(* Previously discussed in New Drug Review for Medicaid)*				

IV. Adjournment

There being no further business to discuss, the meeting was adjourned. Next meeting is to be held October 2025.



9/5/2025

Danielle Dolores, Director of Pharmacy Services Date: _____

APPENDIX I: VOTING GRID

	Danielle Dolores, PharmD	George Downs, PharmD	Lawrence Jones, RPh	Tania Kolev, MD	Hannah McCaffrey	Sanjiv Raj	Brian Swift	Kaylei Koerwitz	Heather Scheckner	Merleen Harris-Williams, MD	Demian Elder, MD	Edgar Chou, MD	Comments
Minutes Review/Approval	A	A	A	A	A	E	A	A	A	A	E	A	*May 2025*
2026 Prior Authorization Criteria Additions – CMS Review	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Prior Authorization Criteria Updates	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Prior Authorization Removals	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Step Therapy Criteria	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Formulary Additions - Outlier Stages 1, 2 and 3	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Formulary Additions	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Formulary Removals	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Tier Updates	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Quantity Limit Additions	A	A	A	A	A	E	A	A	A	A	E	A	
2026 Quantity Limit Updates	A	A	A	A	A	E	A	A	A	A	E	A	
2025 Prior Authorization Criteria Updates	A	A	A	A	A	E	A	A	A	A	E	A	
2025 Formulary Additions	A	A	A	A	A	E	A	A	A	A	E	A	
2025 Formulary Removals	A	A	A	A	A	E	A	A	A	A	E	A	
2025 May, June, July FRF Formulary Additions Protected Class	A	A	A	A	A	E	A	A	A	A	E	A	
2025 May, June, July FRF Formulary Additions Non-Protected Class	A	A	A	A	A	E	A	A	A	A	E	A	
2025 May, June, July FRF Formulary Removals	A	A	A	A	A	E	A	A	A	A	E	A	
2025 Quantity Limit Additions	A	A	A	A	A	E	A	A	A	A	E	A	
2025 Quantity Limit Updates	A	A	A	A	A	E	A	A	A	A	E	A	
New Drug Review	A	A	A	A	A	E	A	A	A	A	E	A	

*A = Approved as presented * R = Rejected * E = Excused from meeting * P = Precluded from vote due to conflict of interest